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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****
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Foreign Priority claimed 35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance ga Initials	STATE OR COUNTRY DC	SHEETS 8	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
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ADDRESS

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 P.O. Box 10064
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 UNITED STATES

TITLE

System and methodology for facilitating the sale of goods and services

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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